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01/24/2005

DLA PIPER RUDNICK GRAY CARY US, LLP
2000 UNIVERSITY AVENUE
E. PALO ALTO, CA 94303-2248

04/21/2005 DEMMANU2 00000036 09895997

01 FC:1501 1400.00 OP
02 FC:1504 300.00 OP
03 FC:8001 21.00 OP

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

| | |
|-------------------------|--------------------|
| Rosa A. Caviedes | (Depositor's name) |
| <i>Rosa A. Caviedes</i> | (Signature) |
| April 6, 2005 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/895,997 | 06/28/2001 | Shinya Hasegawa | 2102475-991130 | 9340 |

TITLE OF INVENTION: SEMICONDUCTOR CIRCUIT AND FUNCTIONAL BLOCK INCLUDING SYNCHRONIZING CIRCUIT FOR DETERMINING OPERATION TIMING

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 04/25/2005 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|-----------|----------|----------------|
| CAO, CHUN | 2115 | 713-001000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 DLA Piper Rudnick
Gray Cary US LLP

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Kabushiki Kaisha Toshiba

JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 7

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 07-1896 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Edward B. Weller

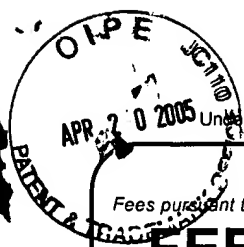
Date April 6, 2005

Typed or printed name Edward B. Weller

Registration No. 37,468

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$1,721.00)

Complete If Known

| | |
|----------------------|-----------------|
| Application Number | 09/895,997 |
| Filing Date | June 28, 2001 |
| First Named Inventor | Shinya Hasegawa |
| Examiner Name | Chun Cao |
| Art Unit | 2115 |
| Attorney Docket No. | 2102475-991130 |

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: 07-1896 Deposit Account Name: DLA Piper Rudnick Gray Cary US LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| <u>Fee Description</u> | | | | <u>Fee (\$)</u> | <u>Fee (\$)</u> |
|---|---------------------|-----------------|-----------------------|----------------------------------|----------------------|
| Each claim over 20 (including Reissues) | | | | 50 | 25 |
| Each independent claim over 3 (including Reissues) | | | | 200 | 100 |
| Multiple dependent claims | | | | 360 | 180 |
| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fees Paid (\$)</u> | <u>Multiple Dependent Claims</u> | |
| _____ - 20 or HP = _____ | x _____ | = _____ | _____ | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
| HP = highest number of total claims paid for, if greater than 20 | | | | | |
| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fees Paid (\$)</u> | | |
| _____ - 3 or HP = _____ | x _____ | = _____ | _____ | | |
| HP = highest number of independent claims paid for, if greater than 3 | | | | | |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| | | | | |
|--------------|--------------|--|----------|---------------|
| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
| - 100 = | /50 = | (round up to a whole number) x | = | |

4. OTHER FEE(S)

| | |
|---|---------|
| Non-English Specification, \$130 fee (no small entity discount) | |
| Other (e.g., late filing surcharge): Issue and Publication Fees (\$1700) and 7 soft copies of patent (\$21) | \$1,721 |

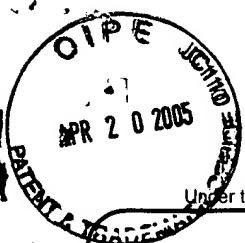
SUBMITTED BY

| | | | |
|-------------------|------------------|---|--------------------------|
| Signature | | Registration No. 37,468 (Attorney/Agent) | Telephone (650) 833-2436 |
| Name (Print/Type) | Edward B. Weller | | Date April 6, 2005 |

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| | | | |
|---|----------------------|------------------------|----------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 09/895,997 | |
| | Filing Date | June 28, 2001 | |
| | First Named Inventor | Shinya Hasegawa | |
| | Art Unit | 2115 | |
| | Examiner Name | Chun Cao | |
| Total Number of Pages in This Submission | 6 | Attorney Docket Number | 2102475-991130 |

| ENCLOSURES (Check all that apply) | | |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached - \$1,721.00 <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Part B - Fee(s) Transmittal (+1 copy); and 2. Return Post Card. |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|------------------------------------|----------|--------|
| Firm Name | DLA Piper Rudnick Gray Cary US LLP | | |
| Signature | | | |
| Printed name | Edward B. Weller | | |
| Date | April 6, 2005 | Reg. No. | 37,468 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
|---|------------------|------|---------------|
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| Signature | | | |
| Typed or printed name | Rosa A. Caviedes | Date | April 6, 2005 |

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